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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless implays a valid OMB control number PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket Number (Optional) 100727-63 / Heraeus 414.1 FY 2006 (Fees pursuant to the Consolidation appropriations Act, 2005 (H.R. 4818).) Application Number Filed 10/770,708 February 3, 2004 DEVICE AND METHOD FOR MANUFACTURING DENTAL PROSTHESIS Examiner 3732 Jonathan S. Werner This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate fee are as follows (check time period desired and enter the appropriate fee): <u>Fee</u> Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 Two months (37 CFR 1.17(a)(2)) \$460 \$230 X Three months (37 CFR 1.17(a)(3)) \$1050 \$525 \$1050. Four months (37 CFR 1.17(a)(4)) \$1640 \$820 Five months (37 CFR 1.17(a)(5)) \$2230 \$1115 Applicant claims small entity status. See 37 CFR 1.26. П A check in the amount of the fee is enclosed. Payment by credit card. Form PTO2038 is attached. The Director has already been authorized tocharge fees in this application to a Deposit Account.  $|\mathbf{x}|$ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 14-1263. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038 I am the applicant/inventor assignee of record of the entire interest. See 37CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney, or agent of record. Registration Number\_ attorney or agent under 37 CFR 1.34(a). 01/29/2008 VBUI11 00000079 141263 10770108 Registration number if acting under 37 CFR 1.34(a) 02 FC:1253 1050.00 DA January 28, 2008 Signature Date KURT G. BRISCOE Typed or printed name (212) 808-0700 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if morentha Total of forms are submitted.

on is required by 37 CFR 1.136(a). This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO tropess) on application. Confidentiality is govern This collection of information is required by 37 CFR 1.136(a). This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO impace) an application. Confidentially is governor or the needs of the individual case. Any comments on the anomal of time you are required to complete this form and/or suggestions for reducing this burnel, should be sent to the Chief Information Officer, U.S. Patients and the U.S. Patients a Trademark Office, U.S. Department of Commerce, P.O. Box 1450 Alexandria, VA 223131450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box

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